

VILLAGE OF BABYLON
153 WEST MAIN STREET
BABYLON, NEW YORK 11702

APPLICATION FOR RESERVED PARKING

NAME: _____

ADDRESS: _____

HOME PHONE #: _____

WORK PHONE #: _____

EMAIL ADDRESS (FOR FUTURE ELECTRONIC BILLING)

I hereby apply for reserved parking in the Village of Babylon, and acknowledge the following:

- 1) I reside in the Village of Babylon.
- 2) Any permit issued as a result of this application is subject to the provisions of the Village of Babylon Uniform Traffic Ordinance, and such rules and regulations pertaining thereto as may be adopted by the Board of Trustees. I may be re-assigned to an area of reserved parking as designated by the Village.
- 3) Any false statements will result in the permit being revoked immediately.

DOCUMENTATION REQUIRED FOR PERMIT TO BE ISSUED:

(Photostats of the following showing Village of Babylon address):

- 1) Vehicle registration
- 2) Applicant's license
- 3) Current phone bill (If you do not have a copy of your phone bill showing your address, please bring in three pieces of mail sent to your address recently)

Please indicate how often you will be using your space:

_____ 4-7 days a week _____ 2-3 days a week _____ 1 day a week

_____ ****once a week _____ once a month

****The reserved numbered spaces are for residents who commute on a regular basis. There are un-numbered spaces in the Shea Lot for "occasional parkers." The annual fee is \$210. If you fall into this category, please note that if your situation changes, and you are commuting on a regular basis, you will be placed at the top of the list for a numbered space.

SIGNATURE OF APPLICANT _____